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Name of Material	Specification	1
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[Name of Document] SPECIFICATION

[Title of the Invention] SUGAR INTAKE-ABILITY ENHANCER

[Scope of Claim for Patent]

[Claim 1]

A sugar intake-ability enhancer into warm-blooded animal cells comprising as an active ingredient one or more HMG-CoA reductase inhibitor(s).

[Claim 2]

A sugar intake-ability enhancer into warm-blooded animals cells in the presence of insulin comprising as an active ingredient one or more HMG-CoA reductase inhibitor(s).

[Claim 3]

A sugar intake-ability enhancer according to claim 1 or 2, wherein the HMG-CoA reductase inhibitor is a medicament selected from the group consisting of pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin and rosuvastatin.

[Claim 4]

A sugar intake-ability enhancer according to claim 1 or 2, wherein the HMG-CoA reductase inhibitor is a water-soluble HMG-CoA reductase inhibitor.

[Claim 5]

A sugar intake-ability enhancer according to claim 1 or 2, wherein the HMG-CoA reductase inhibitor is a medicament selected from the group consisting of pravastatin and rosuvastatin.

[Claim 6]

A sugar intake-ability enhancer according to claim 1 or 2, wherein the HMG-CoA reductase inhibitor is pravastatin.

[Claim 7]

A therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, or a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), comprising as an active ingredient one or more medicament(s) selected from the group consisting of pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin and rosuvastatin.

[Claim 8]

A therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus caused by insulin resistance syndrome, or a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, comprising as an active ingredient one or more medicament(s) selected from the group consisting of pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin and rosuvastatin.

[Claim 9]

A therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, or a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), comprising as an active ingredient one or more water-soluble HMG-CoA reductase inhibitor(s).

[Claim 10]

A therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus caused by insulin resistance syndrome, or a therapeutic or

preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, comprising as an active ingredient one or more water-soluble HMG-CoA reductase inhibitor(s).

[Claim 11]

A therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, or a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) according to claim 9 or 10, wherein the water-soluble HMG-CoA reductase inhibitor is a medicament selected from the group consisting of pravastatin and rosuvastatin.

[Claim 12]

A therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, or a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) according to claim 9 or 10, wherein the water-soluble HMG-CoA reductase inhibitor is pravastatin.

[Detailed Description of the Invention]

[0001]

[Technical field to which the invention belongs]

The present invention relates to a sugar intake-ability enhancer into warm-blooded animal cells; sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin; a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus; a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease); and a therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, containing as an active ingredient one or more HMG-CoA reductase inhibitor(s).

[0002]

[Prior Art]

Blood glucose level is primarily determined by the balance between the uptake of glucose in peripheral tissues such as muscle and fat and the production of glucose in the liver. Insulin, which is secreted from the pancreas according to the blood glucose level, maintains homeostasis of blood glucose levels by promoting glucose uptake in these peripheral tissues and suppressing glucose production in the liver. When diabetes and so forth occurs caused by increased insulin resistance, the action of insulin weakens resulting in a disorder in the blood glucose level control function. As a result, a state of elevated blood glucose continues resulting in glucotoxicity throughout the body, and severe hyperglycemia causes diabetes complications such as retinopathy and neuropathy. Medicaments that enhance

glucose uptake in peripheral tissues have the action of improving hyperglycemia by promoting glucose metabolism, and are useful for the therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (Homko, C.J. et al., *Diabetes*, 2003, 52, 487-491; Giannoukakis, N. et al., *BioDrugs*, 2002, 16, 149-173).

[0003]

A disease state associated with increased insulin resistance, or so-called insulin resistance syndrome, is the major cause of diabetes, while also being considered to be the fundamental cause of lifestyle diseases including circulatory diseases (arteriosclerosis, hypertension, etc.) and obesity (McVeigh, G.E. et al., *Current Diabetes Reports*, 2003, 3, 87-92; Chaudhuri, A. et al., *Current Diabetes Reports*, 2002, 2, 305-310; Sorisky, A. et al., *American Journal of Therapeutics*, 2002, 9, 516-521).

Insulin resistance is related to glucose uptake in peripheral tissues, and improvement of insulin resistance is known to promote glucose uptake in peripheral tissues (Vazquez, M. et al., *Methods & Findings in Experimental & Clinical Pharmacology*, 2002, 24, 513-523). Thus, medicaments that enhance glucose uptake in peripheral tissues by acting on the function of insulin to improve insulin resistance are useful for the therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications caused by insulin resistance syndrome.

[0004]

Although certain types of quinone compounds or nucleic acid derivatives have been known to demonstrate glucose uptake enhancing action in cells of peripheral tissues (for example, see Non patent document 4 or 5), HMG-CoA reductase

inhibitors have not been known to demonstrate glucose uptake enhancing action on warm-blooded animal cells.

[0005]

[Non patent document 4] Zhang, B. et al., *Science*, 1999, 284, 974-977.

[Non patent document 5] Merill, G.F. et al., *American Journal of Physiology, Endocrinology and Metabolism*, 1997, 273, E1107-E1112.

HMG-CoA (3-hydroxy-3-methylglutaryl-CoA) reductase inhibitors are well-known hyperlipidemia therapeutic medicaments (for example, US Patent No. 4346227 et al.). Statins are typical HMG-CoA reductase inhibitors, and disease preventive effects in humans have been confirmed in various clinical studies. For example, pravastatin has been reported to demonstrate effects (preventive effects) that suppress the onset of arteriosclerosis, coronary artery disease and diabetes in a clinical study targeted at hyperlipidemia patients (for example, see Non patent documents 1 to 3).

[Non patent document 1] MacMahon, S. et al., *Circulation*, 1998, 97, 1784-1790.

[Non patent document 2] Shepherd, J. et al., *Lancet*, 2002, 360, 1623-1630.

[Non patent document 3] Freeman, D.J. et al., *Circulation*, 2001, 103, 357-362.

However, HMG-CoA reductase inhibitors are not known to demonstrate therapeutic effects for diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus as well as therapeutic or preventive effects for diabetes complications.

[0006]

[Problem to be solved by the invention]

The inventors of the present invention found that an

HMG-CoA reductase inhibitor has superior glucose uptake enhancing action on warm-blooded animal cells, and is useful as a sugar intake-ability enhancer into warm-blooded animal cells, a sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin, a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), and a therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, thereby leading to completion of the present invention.

[0007]

[Means for solving the problem]

The present invention provides a sugar intake-ability enhancer into warm-blooded animal cells, sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin, a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), and a therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, comprising as an active ingredient one or more HMG-CoA reductase inhibitor(s).

[0008]

The present invention is:

- (1) a sugar intake-ability enhancer into warm-blooded animal cells comprising as an active ingredient one or more HMG-CoA reductase inhibitor(s),
- (2) a sugar intake-ability enhancer into warm-blooded animals cells in the presence of insulin comprising as an active ingredient one or more HMG-CoA reductase inhibitor(s),
- (3) a sugar intake-ability enhancer as (1) or (2), wherein the HMG-CoA reductase inhibitor is a medicament selected from the group consisting of pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin and rosuvastatin,
- (4) a sugar intake-ability enhancer as (1) or (2), wherein the HMG-CoA reductase inhibitor is a water-soluble HMG-CoA reductase inhibitor,
- (5) a sugar intake-ability enhancer as (1) or (2), wherein the HMG-CoA reductase inhibitor is a medicament selected from the group consisting of pravastatin and rosuvastatin,
- (6) a sugar intake-ability enhancer as (1) or (2), wherein the HMG-CoA reductase inhibitor is pravastatin,
- (7) a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, or the therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), comprising as an active ingredient one or more medicament(s) selected from the group consisting of pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin and rosuvastatin,
- (8) a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus caused by insulin resistance syndrome, or the therapeutic or preventive agent of diabetes complications (including

retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, comprising as an active ingredient one or more

medicament(s) selected from the group consisting of pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin and rosuvastatin,

(9) a therapeutic agent of diabetes, hyperglycemia,

glucose intolerance or gestational diabetes mellitus, or

the therapeutic or preventive agent of diabetes

complications (including retinopathy, nephropathy,

neuropathy, cataract and coronary artery disease),

comprising as an active ingredient one or more water-soluble HMG-CoA reductase inhibitor(s),

(10) a therapeutic agent of diabetes, hyperglycemia,

glucose intolerance or gestational diabetes mellitus caused by insulin resistance syndrome, or a therapeutic or

preventive agent of diabetes complications (including

retinopathy, nephropathy, neuropathy, cataract and coronary

artery disease) caused by insulin resistance syndrome,

comprising as an active ingredient one or more water-soluble HMG-CoA reductase inhibitor(s),

(11) a therapeutic agent of diabetes, hyperglycemia,

glucose intolerance or gestational diabetes mellitus, or a

therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) as (9) or (10), wherein the

water-soluble HMG-CoA reductase inhibitor is a medicament

selected from the group consisting of pravastatin and

rosuvastatin,

(12) a therapeutic agent of diabetes, hyperglycemia,

glucose intolerance or gestational diabetes mellitus, or a

therapeutic or preventive agent of diabetes complications

(including retinopathy, nephropathy, neuropathy, cataract

and coronary artery disease) as (9) or (10), wherein the water-soluble HMG-CoA reductase inhibitor is pravastatin.

[0009]

There are no particular restrictions on the HMG-CoA reductase inhibitor(s) serving as an active ingredient compound of the present invention provided it is a compound that demonstrates HMG-CoA reductase inhibitory action, examples of which include compounds having HMG-CoA reductase inhibitory action, pharmacologically acceptable salts thereof, or pharmacologically acceptable esters thereof as described in Japanese Patent Application (Kokai) No. Sho 57-2240 (US Patent No. 4346227), Japanese Patent Application (Kokai) No. Sho 57-163374 (US Patent No. 4231938), Japanese Patent Application (Kokai) No. Sho 56-122375 (US Patent No. 4444784), Japanese Patent Application (Kokai) No. Sho 60-500015 (US Patent No. 4739073), Japanese Patent Application (Kokai) No. Hei 1-216974 (US Patent No. 5006530), Japanese Patent Application (Kokai) No. Hei 3-58967 (US Patent No. 5273995), Japanese Patent Application (Kokai) No. Hei 1-279866 (US Patent Nos. 5854259 and 5856336) or Japanese Patent Application (Kokai) No. Hei 5-178841 (US Patent No. 5260440), preferably pravastatin, lovastatin, simvastatin, fluvastatin, cerivastatin, atorvastatin, pitavastatin or rosuvastatin, more preferably pravastatin or rosuvastatin, and most preferably pravastatin.

[0010]

For an HMG-CoA reductase inhibitor serving as an active ingredient compound of the present invention, a water-soluble HMG-CoA reductase inhibitor such as pravastatin and rosuvastatin is preferable. In the present invention, a water-soluble HMG-CoA reductase inhibitor is an HMG-CoA reductase inhibitor in which the logarithm of

the partition coefficient measured between phosphate buffer solution (pH 7.0 to 8.0, preferably pH 7.0 to 7.5, and more preferably pH 7.0) and 1-octanol [log(test substance concentration in 1-octanol phase/test substance concentration in buffer solution phase)] is 1.0 or less (preferably 0.5 or less, and more preferably 0.0 or less) (McTaggart, F. et al., *The American Journal of Cardiology*, 2001, 87, 28B-32B; Chapman, M. J. et al., *Atherosclerosis Supplements*, 2002, 33-37; Shimada, Y. et al., *Progress in Medicine*, 1998, 18, 957-962). The aforementioned partition coefficient can be measured according to ordinary methods (Partition Coefficient (n-octanol/water), OECD Guidelines for Testing of Chemicals, Section 1, Physical Chemical Properties, Paris, 1981, 107; Shimada, Y. et al., *Progress in Medicine*, 1998, 18, 957-962) or similar methods thereto.

[0011]

In addition, for an HMG-CoA reductase inhibitor serving as an active ingredient compound of the present invention, pravastatin or derivative thereof, or rosuvastatin or derivative thereof, is preferable. In the present invention, a derivative of pravastatin is a compound having HMG-CoA reductase inhibitory action, a pharmacologically acceptable salt thereof or ester thereof as described in Japanese Patent Application (Kokai) No. Sho 57-2240 (US Patent No. 4346227), while a derivative of rosuvastatin is a compound having HMG-CoA reductase inhibitory action, a pharmacologically acceptable salt thereof or ester thereof as described in Japanese Patent Application (Kokai) No. Hei 5-178841 (US Patent No. 5260440).

[0012]

Pravastatin is (+)-(3R,5R)-3,5-dihydroxy-7-[(1S,2S,6S,8S,8aR)-6-hydroxy-2-methyl-8-[(S)-2-

methylbutyryloxy]-1,2,6,7,8,8a-hexahydro-1-naphthyl]heptanoic acid, and includes its pharmacologically acceptable salts or esters (for example, monosodium salt of the aforementioned pravastatin, etc.) as described in Japanese Patent Application (Kokai) No. Sho 57-2240 (US Patent No. 4346227). Lovastatin is (+)-(1S,3R,7S,8S,8aR)-1,2,3,7,8,8a-hexahydro-3,7-dimethyl-8-[2-[(2R,4R)-tetrahydro-4-hydroxy-6-oxo-2H-pyran-2-yl]ethyl]-1-naphthyl (S)-2-methylbutyrate, and includes its pharmacologically acceptable salts or esters as described in Japanese Patent Application (Kokai) No. Sho 57-163374 (US Patent No. 4231938). Simvastatin is (+)-(1S,3R,7S,8S,8aR)-1,2,3,7,8,8a-hexahydro-3,7-dimethyl-8-[2-[(2R,4R)-tetrahydro-4-hydroxy-6-oxo-2H-pyran-2-yl]ethyl]-1-naphthyl 2,2-dimethylbutyrate, and includes its pharmacologically acceptable salts or esters as described in Japanese Patent Application (Kokai) No. Sho 56-122375 (US Patent No. 4444784). Fluvastatin is (±)-(3R*,5S*,6E)-7-[3-(4-fluorophenyl)-1-(1-methylethyl)-1H-indol-2-yl]-3,5-dihydroxy-6-heptenoic acid, and includes its pharmacologically acceptable salts or esters (for example, monosodium salt of the aforementioned fluvastatin, etc.) as described in Japanese Patent Application (Kokai) No. Sho 60-500015 (US Patent No. 4739073). Cerivastatin is (3R,5S,6E)-7-[4-(4-fluorophenyl)-2,6-di-(1-methylethyl)-5-methoxymethylpyridin-3-yl]-3,5-dihydroxy-6-heptenoic acid, and includes its pharmacologically acceptable salts or esters (for example, monosodium salt of the aforementioned cerivastatin, etc.) as described in Japanese Patent Application (Kokai) No. Hei 1-216974 (US Patent No. 5006530). Atorvastatin is (3R,5S)-7-[2-(4-fluorophenyl)-5-(1-methylethyl)-3-phenyl-4-phenylaminocarbonyl-1H-pyrrol-1-yl]-3,5-dihydroxyheptanoic acid, and includes its

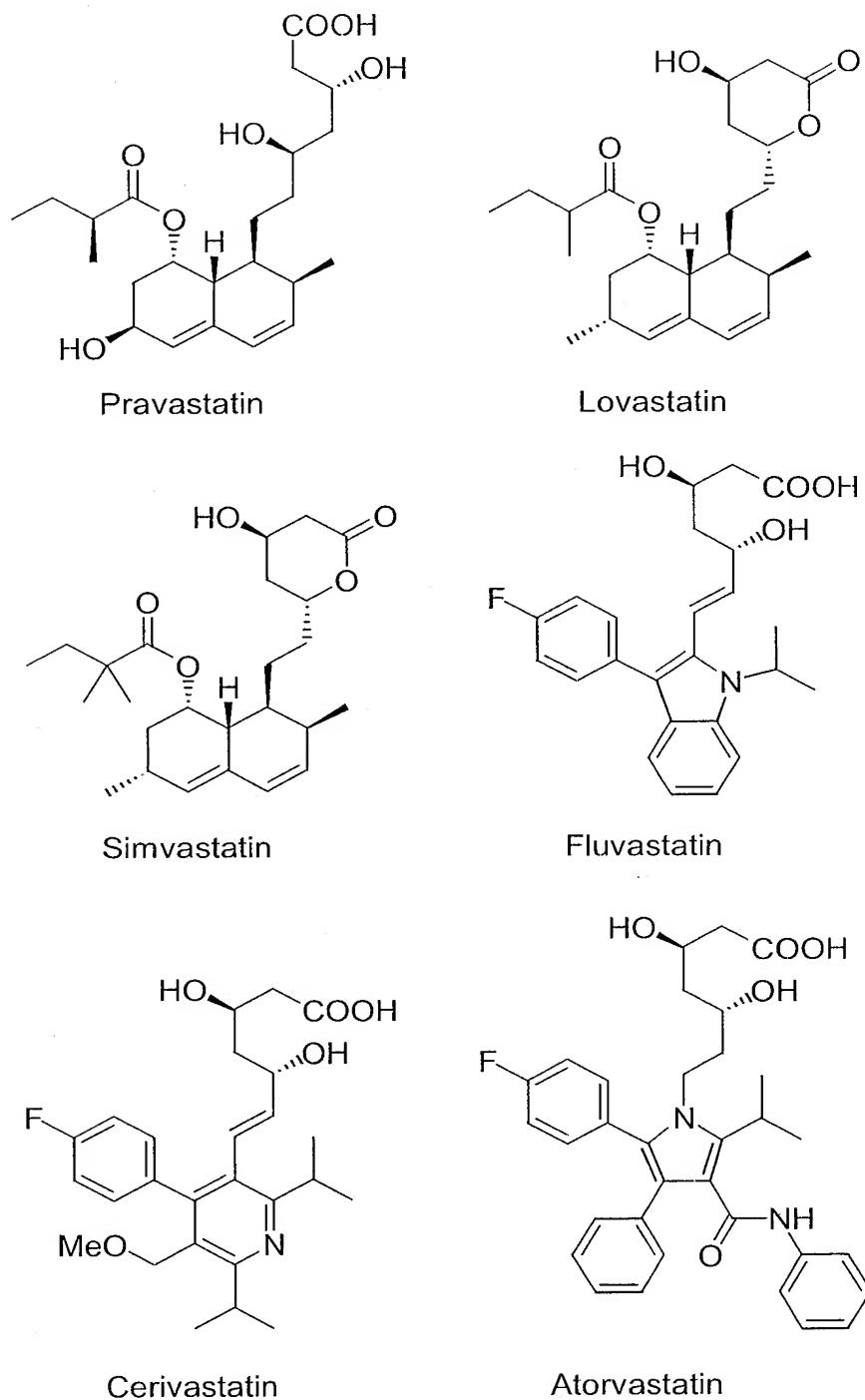
pharmacologically acceptable salts or esters (for example, 1/2 calcium salt of the aforementioned atorvastatin, etc.) as described in Japanese Patent Application (Kokai) No. Hei 3-58967 (US Patent No. 5273995). Pitavastatin is (E)-3,5-dihydroxy-7-[4'-(4"-fluorophenyl)-2'-cyclopropylquinolin-3'-yl]-6-heptenoic acid, and includes its pharmacologically acceptable salts or esters (for example, 1/2 calcium salt of the aforementioned pitavastatin, etc.) as described in Japanese Patent Application (Kokai) No. Hei 1-279866 (US Patent Nos. 5854259 and 5856336). Rosuvastatin is (+)- (3R,5S)-7-[4-(4-fluorophenyl)-6-isopropyl-2-(N-methyl-N-methanesulfonylamino)pyrimidin-5-yl]-3,5-dihydroxy-6(E)-heptenoic acid, and includes its pharmacologically acceptable salts or esters (for example, 1/2 calcium salt of the aforementioned rosuvastatin, etc.) as described in Japanese Patent Application (Kokai) No. Hei 5-178841 (US Patent No. 5260440).

[0013]

The following indicates the two-dimensional structural formulas of major HMG-CoA reductase inhibitors.

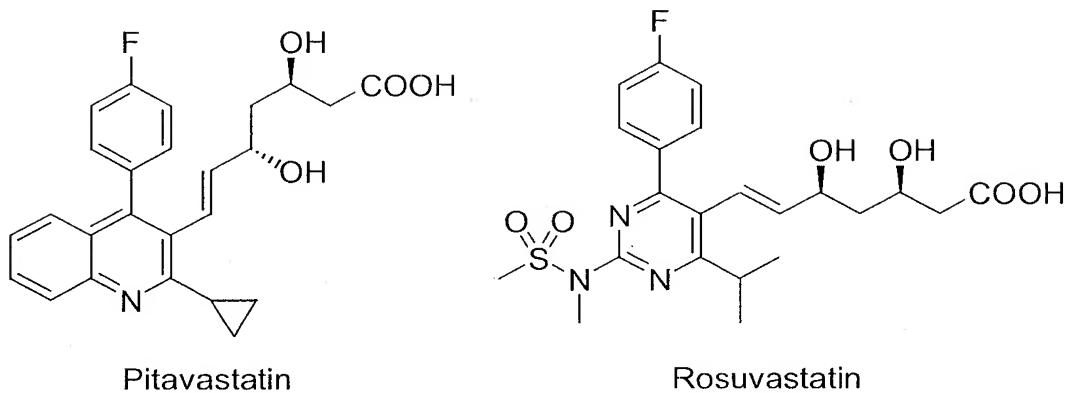
[0014]

[Chemical formula 1]



[0015]

[Chemical formula 2]



Pitavastatin

Rosuvastatin

[0016]

In the case where the aforementioned HMG-CoA reductase inhibitor has an asymmetric carbon, all of its racemate, its optical isomers and mixtures thereof are included in the HMG-CoA reductase inhibitor of the present invention. In addition, hydrates of the aforementioned HMG-CoA reductase inhibitors are also included in the HMG-CoA reductase inhibitor of the present invention.

[0017]

For an HMG-CoA reductase inhibitor serving as an active ingredient compound in the present invention, one type of compound can be used alone, or a mixture of two or more types of compounds can be used. In the case of using a mixture of two or more types of compounds, the compounds can be used simultaneously or each of compounds can be used separately at different times.

[0018]

Since the HMG-CoA reductase inhibitor(s) serving as an active ingredient of the present invention has superior glucose uptake enhancing action in the presence or absence of insulin (preferably in the presence of insulin) in warm-blooded animal cells (preferably warm-blooded animal adipocytes), it is useful as a sugar intake-ability enhancer into warm-blooded animal cells, a sugar intake-ability enhancer into warm-blooded animal cells in the

presence of insulin, a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), and therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, preferably a sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin, therapeutic agent of diabetes, therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus caused by insulin resistance syndrome, and therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, more preferably a sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin, therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus caused by insulin resistance syndrome, and therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, and even more preferably a sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin; therapeutic agent of diabetes caused by insulin resistance syndrome, and therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy,

neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome.

In addition, the aforementioned pharmaceutical composition is preferably for warm-blooded animals, and more preferably for humans.

[0019]

[Mode for carrying out the invention]

An HMG-CoA reductase inhibitor serving as an active ingredient of the present invention can easily be prepared in accordance with known methods [for example, Japanese Patent Application (Kokai) No. Sho 57-2240 (US Patent No. 4346227), Japanese Patent Application (Kokai) No. Sho 57-163374 (US Patent No. 4231938), Japanese Patent Application (Kokai) No. Sho 56-122375 (US Patent No. 4444784), Japanese Patent Application (Kokai) No. Sho 60-500015 (US Patent No. 4739073), Japanese Patent Application (Kokai) No. Hei 1-216974 (US Patent No. 5006530), Japanese Patent Application (Kokai) No. Hei 3-58967 (US Patent No. 5273995), Japanese Patent Application (Kokai) No. Hei 1-279866 (US Patent Nos. 5854259 and 5856336), Japanese Patent Application (Kokai) No. Hei 5-178841 (US Patent No. 5260440), etc.] or similar methods thereto.

[0020]

In the case of using the HMG-CoA reductase inhibitor(s) serving as an active ingredient of the present invention as a pharmaceutical (therapeutic or preventive agent of the aforementioned diseases), it can be administered in the form of a bulk medicament of the pharmaceutical itself; or it can be orally administered in a formulation such as tablet, capsule, granules, pill, powder, liquid, syrup, troche, suspension, emulsion, etc. or be parenterally administered in a formulation such as an injection, suppository or patch, etc., which formulations

are made by mixing the HMG-CoA reductase inhibitor with a suitably pharmacologically acceptable excipient, binder and so forth. An oral administration is preferred.

[0021]

These formulations are prepared using well-known methods using additives such as excipients, binders, disintegrants, lubricants, emulsifiers, stabilizers, corrigents, diluents, injection solvents and so forth.

[0022]

An excipient may be, for example, an organic excipient or inorganic excipient. Examples of organic excipients include sugar derivatives such as lactose, sucrose, glucose, mannitol and sorbitol; starch derivatives such as cornstarch, potato starch, alpha starch, dextrin and carboxymethyl starch; cellulose derivatives such as crystalline cellulose, hydroxypropyl cellulose, low substituted hydroxypropyl cellulose, hydroxypropylmethyl cellulose, carboxymethyl cellulose, calcium carboxymethyl cellulose, and internally-crosslinked sodium carboxymethyl cellulose; gum arabic; dextran; and pullulan. Examples of inorganic excipients include silicic acid salt derivatives such as light anhydrous silicic acid, synthetic aluminium silicate, calcium silicate, and magnesium metasilicate aluminate; phosphoric acid salts such as calcium phosphate; carbonic acid salts such as calcium carbonate; and sulfuric acid salts such as calcium sulfate.

[0023]

Examples of binders include the compounds as described for the aforementioned excipient; gelatin; polyvinylpyrrolidone; and, polyethylene glycol.

[0024]

Examples of disintegrants include the compounds as described for the aforementioned excipient; chemically

modified starch or cellulose derivatives such as crosscarmelose sodium and sodium carboxymethyl starch; and, crosslinked polyvinylpyrrolidone.

[0025]

Examples of lubricants include talc; stearic acid; metal stearates such as calcium stearate and magnesium stearate; colloidal silica; waxes such as bee gum and spermaceti; boric acid; glycol; DL-leucine; carboxylic acids such as fumaric acid and adipic acid; carboxylic acid sodium salts such as sodium benzoate; sulfates such as sodium sulfate; lauryl sulfates such as sodium lauryl sulfate and magnesium lauryl sulfate; silicic acids such as anhydrous silicic acid and silicic acid hydrate; and the above starch derivatives as for the aforementioned excipients.

[0026]

Examples of emulsifiers include colloidal clays such as bentonite and bee gum; metal hydroxides such as magnesium hydroxide and aluminium hydroxide; anionic surfactants such as sodium lauryl sulfate and calcium stearate; cationic surfactants such as benzalkonium chloride; and, nonionic surfactants such as polyoxyethylene alkyl ether, polyoxyethylene sorbitan fatty acid ester, and sucrose fatty acid ester.

[0027]

Examples of stabilizers include parahydroxybenzoic acid esters such as methyl paraben and propyl paraben; alcohols such as chlorobutanol, benzyl alcohol and phenylethyl alcohol; benzalkonium chloride; phenols such as phenol and cresol; thimerosal; dehydroacetic acid; and sorbic acid.

[0028]

Examples of corrigents include ordinarily used

sweeteners, sour flavourings, fragrances, etc.

[0029]

Examples of diluents include water, ethanol, propylene glycol, ethoxyisostearyl alcohol and polyoxyethylene sorbitan fatty acid ester.

[0030]

Examples of injection solvents include water, ethanol and glycerin.

[0031]

The HMG-CoA reductase inhibitor(s) serving as an active ingredient of the present invention can be administered to a warm-blooded animal (and particularly a human). The dose can be varied depending on various conditions such as the symptoms and age of the patient. In the case of oral administration, 0.1 mg (preferably 0.5 mg) as a lower limit and 1000 mg (preferably 500 mg) as an upper limit can be administered once to six times per day for a human adult depending on the symptoms. In the case of parenteral administration, 0.01 mg (preferably 0.05 mg) as a lower limit and 100 mg (preferably 50 mg) as an upper limit can be administered once to six times per day for a human adult depending on the symptoms.

[0032]

[Examples]

Although the following provides a more detailed explanation of the present invention by indicating Examples and Formulation examples, the scope of the present invention is not limited thereto.

(Example 1)

(1) Cell culturing

Preadipocyte cell line 3T3-L1 was purchased from the American Type Culture Collection (ATCC). The 3T3-L1 cells

were plated onto a 24-well, collagen-coated plate and cultured to saturation in growth medium (DMEM, 25 mM glucose, 10% FCS, 100 u/ml penicillin, 0.1 mg/ml streptomycin) under conditions of 37°C and 5% CO₂. Five days after cell proliferation had reached a saturated state, the medium was replaced with medium (DMEM, 25 mM glucose, 10% FCS, 100 u/ml penicillin, 0.1 mg/ml streptomycin) to which had been added 1 μ M insulin, 0.5 mM 3-isobutyl-1-methylxanthine and 1 μ M dexamethazone to initiate adipocyte differentiation. Two days later, the medium was replaced with growth medium containing 1 μ M insulin followed by additionally culturing the cells for 2 days. Subsequently, the medium was replaced with fresh growth medium every 3 days, and the 3T3-L1 adipocytes were prepared on day 10 after the start of differentiation.

[0033]

Test compounds that were poorly soluble in water were used after dissolving in DMSO. Test compounds that were easily soluble in water were dissolved in sterile water followed by addition of the same amount of DMSO as that used for the aforementioned poorly water-soluble test compounds. In addition, in the case of test compounds that are poorly soluble in water, the test compound may be dissolved in ethanol and used following the addition of 0.1 N aqueous sodium hydroxide solution after shaking as necessary.

[0034]

After allowing the 3T3-L1 cells to adequately differentiate into adipocytes, a test compound was added to the medium to a final concentration of 10 μ M followed by culturing the cells for 72 hours.

(2) Measurement of glucose uptake

Following treatment with the test compound, the cells were washed with KRBH buffer solution (6.91 g/l NaCl, 0.37 g/l KCl, 0.30 g/l MgSO₄ · 7H₂O, 0.19 g/l CaCl₂ · 2H₂O, 0.21 g/l K₂HPO₄, 25 mM HEPES, 2 g/l NaHCO₃, 0.1% BSA (Sigma), 0.11 g/l sodium pyruvate, 100 u/ml penicillin, 0.1 mg/ml streptomycin) and then cultured for 3.5 hours at 37°C. Subsequently, insulin was added to the cells followed by additionally culturing the cells for 30 minutes.

[0035]

Measurement of glucose uptake was carried out in the manner described below. Namely, 0.1 µCi of ³H-labeled 2-deoxyglucose was added to the medium followed by removal of the medium ten minutes later and washing with phosphate buffer solution (phosphate-buffered saline: PBS, pH 7.4). After washing, 200 µl of 1 N aqueous sodium hydroxide solution were added to the cells to lyse the cells. 160 µl of the cell lysate were mixed with 4 ml of Hionic Fluor (Perkin-Elmer) liquid scintillation counter cocktail followed by measurement of the radioactivity in the cell lysate with a liquid scintillation counter (Packard). The determined radioactivity of the ³H-labeled 2-deoxyglucose was used as an indicator of the amount of glucose taken up into the cells. The amount of glucose uptake into the cells was 1.9 times higher (P<0.001) in the group in which pravastatin was used for the test compound than in the control group.

[0036]

According to this result, an HMG-CoA reductase inhibitor serving as an active ingredient of the present invention was determined to have superior action of enhancing glucose uptake into warm-blooded animal cells, and be useful as a sugar intake-ability enhancer into warm-

blooded animal cells; a glucose uptake enhancer into warm-blooded animal cells in the presence of insulin, a therapeutic agent of diabetes, a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome, etc..

(Formulation Example 1) Tablets

After mixing 10 parts of pravastatin sodium, 71.55 parts of lactose, 20 parts of low substituted hydroxypropyl cellulose (LH21, Shin-Etsu Chemical), 20 parts of crystalline cellulose (Avicel PH101, Asahi Kasei) and 6.5 parts of magnesium metasilicate aluminate (Neusilin FL2, Fuji Chemical Industry) with a Henschel mixer (Mitsui Mining), 13 parts of a 10% aqueous solution of hydroxypropyl cellulose (Nippon Soda) and a suitable amount of water were added to the resulting mixture followed by kneading with a Henschel mixer. The resulting kneaded product was dried for 1 hour at 60°C with an air dryer. The resulting dried product was sized with a power mill (Dalton) equipped with a 1 mm ϕ diameter screen, and 129.35 parts of the resulting granules and 0.65 parts of magnesium stearate (NOF Corporation) were mixed with a V-mixer (Tokuju Seisakusho). The resulting mixture was formed into tablets to produce tablets having a diameter of 7.0 mm.

[0037]

[Effect of the invention]

An HMG-CoA reductase inhibitor serving as an active ingredient of the present invention has superior glucose

uptake enhancing action on warm-blooded animal cells, and is useful as a sugar intake-ability enhancer into warm-blooded animal cells, sugar intake-ability enhancer into warm-blooded animal cells in the presence of insulin, a therapeutic agent of diabetes, hyperglycemia, glucose intolerance or gestational diabetes mellitus, a therapeutic or preventive agent of diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease), and a therapeutic or preventive agent of diabetes, hyperglycemia, glucose intolerance, gestational diabetes mellitus or diabetes complications (including retinopathy, nephropathy, neuropathy, cataract and coronary artery disease) caused by insulin resistance syndrome.

[Name of Document] ABSTRACT

[Abstract]

[Object]

The present invention provides compounds having a superior enhancement of glucose uptake-ability action.

[Means for Solution]

The sugar intake-ability enhancer and medicaments contain an HMG-CoA reductase inhibitor.

[Selected Drawing]

None.

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